



01-06-04

RCE/3637
PATENT
9D-DW-19866

IN THE UNITED STATES OFFICE OF PATENTS AND TRADEMARKS

Applicant: Max Douglas Oyler et al.

Serial Number: 09/930,721

Filed: August 15, 2001

For: DISHWASHER DOOR ASSEMBLY

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Group Art Unit: 3637

Examiner: Janet M. Wilkens

**CERTIFICATE OF MAILING BY EXPRESS MAIL TO
THE COMMISSIONER OF PATENTS AND TRADEMARKS**

Express Mail mailing label number: EV331420187US

Date of Mailing: January 5, 2004

I certify that the documents listed below:

- Request For Continued Examination (1 pg.), in duplicate
- Amendment After Final Office Action (15 pgs.), in response to Office Action dated October 3, 2003 and made final, and Advisory Action dated December 17, 2003
- Amendment Transmittal Form (3 pgs.), in duplicate
- Return Post Card

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to: Mail Stop: RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Michael Tersillo

Reg. No. 42,180

ARMSTRONG TEASDALE LLP

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St. Louis, MO 63102-2740

(314) 621-5070

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JAN 12 2004
GROUP 3600



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Max Douglas Oyler, et al.
Serial No.: 09/930,721
Filed: August 15, 2001
For: DISHWASHER DOOR ASSEMBLY

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: Group No.: 3647
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: Examiner: Wilkens, Janet M.
:
:

Commissioner for Patents
Mail Stop AF
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

- Transmitted herewith is:
Amendment Transmittal (3 pgs.), in duplicate
Amendment After Final Office Action (15 pgs.), in response to Office Action dated October 3, 2003 and made final, and Advisory Action dated 12/17/03

STATUS

- Applicant
☐ Claims small entity status.
☒ is other than a small entity.

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Michael Tersillo, Reg. No. 42,180

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☐ Applicant petitions for an extension of time under 37 C.F.R. 1.136
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
<input type="checkbox"/> first month	\$ 110.00	\$ 55.00
<input type="checkbox"/> second month	\$ 410.00	\$ 205.00
<input type="checkbox"/> third month	\$ 930.00	\$ 465.00
<input type="checkbox"/> fourth month	\$1,450.00	\$ 725.00
<input type="checkbox"/> fifth month	\$1,970.00	\$ 985.00

Fee Due \$ _____

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

- ☐ An extension of _____ months has already been secured. The fee paid therefor \$_____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____.

OR

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY ADDITIONAL RATE FEE	OR	OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE
TOTAL	MINUS	=		x \$9 = \$		x \$18 = \$
INDEP.	MINUS	=		x \$42 = \$		x \$84 = \$
— FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ \$140 = \$		+ \$280 = \$
				TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

(a) ☒ No additional fee for Claims is required

OR

(b) ☐ Total additional fee for claims required \$

FEE PAYMENT

5. Attached is a check in the sum of \$

☐ Charge Deposit Account No. 01-2384 the sum of \$
A duplicate of this transmittal is attached.

FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. ☐ Other:



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